

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 10/628,651
 Applicant: Joseph W. Harris
 Filed: July 28, 2003
 Group Art Unit: 1793
 Title: **PHOSPHORUS-COPPER BASE BRAZING ALLOY**
 Attorney Docket: JWH-59US
 Confirmation No.: 4424

Cincinnati, Ohio 45202

VIA ELECTRONIC FILING

November 11, 2008

Mail Stop Appeal Brief - Patents
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

TRANSMITTAL OF BRIEF ON APPEAL
(PATENT APPLICATION - 37 CFR § 1.192)

1. Transmitted herewith is the BRIEF ON APPEAL in this application with respect to the Notice of Appeal filed on July 8, 2008.
2. **STATUS OF APPLICANT**
☒ Small Entity
☐ Other than a small entity
3. **FEE FOR FILING APPEAL BRIEF**
 Pursuant to 37 CFR § 1.17(f) the fee for filing the Appeal Brief is:
☒ Small Entity **\$270**
☐ Other than a small entity \$540
4. **EXTENSION OF TIME**
 Applicant petitions for an extension of time under 37 CFR § 1.136 for the total number of months checked below:

	<u>Extension (Months)</u>	<u>Fee for Other than Small Entity</u>	<u>Fee for Small Entity</u>
<u> </u>	First Month	\$ 130.00	\$ 65.00
<u> X </u>	Second Month	490.00	245.00
<u> </u>	Third Month	1,100.00	555.00
<u> </u>	Fourth Month	1,730.00	865.00
<u> </u>	Fifth Month	2,350.00	1,175.00

If an extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

☐ An extension for ____ months has already been secured and the fee paid therefor of \$____ is deducted from the total fee due for the total months of extension now requested.

☐ Extension fee due with this request totals \$____

or

☐ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition and fee for extension of time.

5. TOTAL FEE DUE

The total fee due is:

Appeal Brief Fee:	\$270.00
Extension Fee (if any):	<u>245.00</u>
Total Fee Due:	\$515.00

6. FEE PAYMENT

☐ Attached is a check in the sum of \$_____.

☒ Payment is made on the attached Electronic Fee Sheet.

7. FEE DEFICIENCY

☒ If any additional extension and/or fee is required, this is a request therefor. Please charge Deposit Account No. 23-3000.

and/or

☒ If any additional fee for claims is required, please charge Deposit Account No. 23-3000.

Respectfully submitted,

WOOD, HERRON & EVANS, L.L.P.

By: /Kristi L. Davidson/

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